

**Publicly Funded Mine Drainage Treatment or Abatement Project Information Sheet**  
**General Project Information**

Project Name and or No.: PENGROVE COAL COMPANY HANEY SITE BF406  
PA-274  
Location: Municipality and County: VENANGO TWP. BUTLER COUNTY  
Watershed: SANDY CREEK  
USGS Quadrangle: EAU CLAIRE  
Latitude and Longitude: 41.164444000000003 -79.81666999999995

**Contact Information**

Contact Organization: PADEP BAMR  
Contact Person: GEORGE STEINER  
Contact Address: 400 MARKET STREET P.O. BOX 8476  
HARRISBURG  
PA  
17105  
Contact Telephone Number: 717783-5645  
Contact Email: gsteiner@state.pa.us

**Organization Currently Responsible For Project Operations, Monitoring and Maintenance**

Is this organization different from Contact Organization? True  
Organization Name: PADEP BAMR CAMBRIA OFFICE  
Organization Contact Name: P.J. SHAH  
Organization Contact Address: \_\_\_\_\_  
Organization Telephone Number: 8144721400  
Organization Email: \_\_\_\_\_

**Site Information**

Who owns the property the project is constructed upon? \_\_\_\_\_  
WAS OWNED BY VINCE AND MARY CORDAN  
NOW OWNED BY RANDY GOTTUS (?)

Driving Directions to the Project Site (from an easily identifiable reference point): \_\_\_\_\_  
FROM I-80, TAKE 38 SOUTHWEST TO CHERRY VALLEY. TURN RIGHT ONTO S.R. 1002, THEN LEFT TO STAY ON  
1002. STAY STRAIGHT ONTO PISGAH ROAD. SITE IS ON THE LEFT.

Special instructions for entry to the site (gates, keys, notifications or permissions, etc.): \_\_\_\_\_  
CAMBRIA OFFICE SHOULD HAVE KEY FOR GATE.

Is there a perpetual access agreement for monitoring and O&M?	<u>Yes</u>	or	No
Is the site readily accessible (by 2WD vehicle)?	<u>Yes</u>	or	No
Was project completed as part of an overall watershed restoration plan?	<u>Yes</u>	or	<u>No</u>
Is the plan available electronically?	Yes	or	No
Could you provide the DEP a copy of the plan?	Yes	or	No
Is a copy of the plan attached?	Yes	or	No

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Project Description (Describe the treatment system including each individual component):

STABILIZATION POND; VERTICAL FLOW REACTOR POND (104' X 144'); SETTLING POND (25' X 25'); WETLAND (25' X 50'); FLUSH POND; DRINKING WATER POND (FOR CATTLE)

**Pre-Construction Discharge Flow and Monitoring Data**

Is data available electronically? \_\_\_\_\_ Yes or No

In what format? Microsoft Excel \_\_\_ Access Database \_\_\_ Other(specify) \_\_\_\_\_

Indicate how flow was measured: UNKNOWN

Indicate laboratory that analyzed samples (or whether field kits were used) UNKNOWN

Could you provide this data to the DEP? Yes or No

Is a copy of the data attached? Yes or No

**Pre-Construction Receiving Stream Flow and Monitoring Data**

Is data available electronically? \_\_\_\_\_ Yes or No

In what format? Microsoft Excel \_\_\_ Access Database \_\_\_ Other(specify) \_\_\_\_\_

Indicate how flow was measured: \_\_\_\_\_

Indicate laboratory that analyzed samples \_\_\_\_\_

Were any biological or fish surveys completed? \_\_\_\_\_ Yes or No

Could you provide this data to the DEP? \_\_\_\_\_ Yes or No

Is a copy of the data attached? \_\_\_\_\_ Yes or No

**Treatment System Design Information and Criteria**

Who or what firm completed project design? (Include name, address, phone, email and contact person, if available): GERALD JACKSON

PADEP BAMR

7177835638

Are digital photographs of the site before, during and/or after construction available? Yes or No

Was there a Specific Restoration or Treatment Goal for this treatment system? Yes or No

If yes, please describe the goal:

What is the Design Flow Rate? 20 gpm

Other design criteria (retention time, acidity loading or removal rate, metals loading or removal rate, alkalinity generation rate, etc.) JOE SCHUECK PROVIDED THE INFORMATION FOR DESIGNING THE TREATMENT. HE DIRECTED THE DESIGNER TO USE THE FACILITIES AND SIZING THAT WAS CONSTRUCTED.

Does the treatment system take all of the flow or is some of the flow bypassed?

ALL

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### Plans and Specifications:

#### As-Bid Project Drawings and Technical Specifications

Is this information available electronically? PLANS ONLY Yes or No  
 Could you provide the DEP a copy of the plan?  Yes or No  
 Is a copy attached?  Yes or No

#### As-Built Drawings

Is this information available electronically? UNKNOWN Yes or No  
 Could you provide the DEP a copy of the plan?  Yes or No  
 Is a copy attached?  Yes or No

### **Construction and Project Funding Information**

What year was the project constructed? 2003  
 When (specific date) did project construction begin? FEBRUARY 14, 2003  
 When (specific date) was project construction completed? AUGUST 13, 2003  
 Who was the Construction Contractor? (Name, Address, Phone, email, contact person)  
JOSEPH C. PURYEAR TRUCKING & EXCAVATING  
254 HARRISVILLE ROAD, WEST SUNBURY, PA 16061  
 When (specific date) did the treatment system go on-line? JULY 10, 2003

#### Primary Funding Partners, and funding provided:

Source	True or false	Amount
Title IV, Appalachian Clean Streams	False	\$ .00
PADEP Growing Greener	False	\$ .00
10% AMD Set Aside Funds	False	\$ .00
EPA Section 319	False	\$ .00
OSM Watershed Cooperative Assistance Program	False	\$ .00
NRCS	False	\$ .00
EPA Watershed Protection	False	\$ .00
USCOE	False	\$ .00
University	False	\$ .00
Private/Foundation	False	\$ .00

How or by whom was treatment system construction funded or other funding not included in the table?

Source	Amount
Bond Forfeiture	\$221,122.54
	\$ .00

### **Post Construction Operation, Monitoring and Maintenance**

Is there a Sampling and Monitoring Plan?  Yes or No  
 Is the plan available electronically?  Yes or No  
 Is a copy of the plan attached?  Yes or No  
 Is treatment system currently being sampled and monitored?  Yes or No  
 If so, by whom? CHECK WITH P.J. SHAH, CAMBRIA OFFICE  
 Approximately how many hours per year are spent doing O,M&M for this system? UNKNOWN

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Where are samples being analyzed? (Name, Address, Phone, email, contact person) \_\_\_\_\_

DEP LAB (?) - CHECK WITH P.J. SHAH, CAMBRIA OFFICE

If DEP Lab is being used, what is the project ID and the Sample Information System (SIS) monitoring point IDs? CN94-38 AND BF406-101.1

Is there an Operation and Maintenance Plan? Yes or No  
Is the plan available electronically? Yes or No  
Could you provide the DEP a copy of this information? Yes or No  
Is a copy of the information attached? Yes or No

Comments on the treatment system: ACCORDING TO P.J. SHAH, THE SYSTEM IS NOT WORKING, AND IT NEEDS TO BE LARGER.

**Post Construction Discharge Flow and Monitoring Data**

Is the data available electronically? UNKNOWN Yes or No  
In what format? Microsoft Excel \_\_\_\_\_ Access Database \_\_\_\_\_ Other(specify) \_\_\_\_\_  
Indicate how flow was measured: UNKNOWN  
Could you provide the DEP a copy of this information? Yes or No  
Is a copy of the information attached? Yes or No

**Post-Construction Receiving Stream Flow and Monitoring Data**

Is the data available electronically? UNKNOWN Yes or No  
In what format? Microsoft Excel \_\_\_\_\_ Access Database \_\_\_\_\_ Other(specify) \_\_\_\_\_  
Indicate how flow was measured: \_\_\_\_\_  
Could you provide the DEP a copy of this information? Yes or No  
Is a copy of the information attached? Yes or No  
Were any biological or fish surveys that were completed on the receiving stream? Yes or No

**Treatment System Maintenance and/or Rehabilitation**

Has rehabilitation work been performed at the site? Yes or No  
True(yes) or false(no): False

If yes, please list the rehabilitation activity. \_\_\_\_\_

If yes, please list the date of rehabilitation. 0

If yes, please list the rehabilitation cost. \$ .00

What routine or non-routine maintenance issues have arisen since system was put online?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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How was maintenance work funded?

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What routine or non-routine maintenance is currently needed or anticipated in the next 1-3 years?  
ACCORDING TO P.J. SHAH, MAINTENANCE WORK WILL HAVE LITTLE BENEFIT ON THE SYSTEM—IT NEEDS TO BE LARGER.

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**Other Comments**

**Person(s) Completing this Form (Name, Address, Phone, email, Date Completed):** \_\_\_

GERALD R. JACKSON 7177835638

400 MARKET ST.

HARRISBURG, PA 17105

gerajackso@state.pa.us

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**Is there any other person, company or organization that should be contacted for information about this treatment system or the information requested in this form?**

(Include Name, Address, Phone, email, etc): \_\_\_

P.J. SHAH 8144721800

CAMBRIA OFFICE

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